



SAN FRANCISCO POLICE DEPARTMENT

Multi-Media Evidence Unit

DIVISION OF CRIME SCENE INVESTIGATIONS

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San Francisco, CA 94103

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Case Report

Date : 2/27/15
Case # : 150-178-555

Submitting Agency : SFPD
Investigator : Sgt Canning/269

Intake Summary:

Sgt Canning is conducting an investigation; as a result of that investigation the below described evidence was seized. Sgt Canning submitted a request to examine the seized cellular phones to extract possible evidence contained within.

Scope of Examination:

To extract all electronic storage information stored on the phone.

Evidence Received:

<u>Device#</u>	<u>Description</u>
0001:	Samsung SGH-M919N Galaxy S4 [REDACTED] Network Provider: Metro PCS

Analysis:

Device 0001:

HTC 0PVC100 was received on 2/27/15 and the phone was locked. I placed the phone in airplane mode to prevent further incoming or outgoing transmissions. I used CelleBrite [REDACTED] to perform a physical extraction to retrieve the data from this phone. Next I used [REDACTED] to parse the extracted data. A report was generated by Cellebrite [REDACTED]. I used CelleBrite [REDACTED] to perform a physical extraction to retrieve the data from the SD card in this phone. Next I used [REDACTED] to parse the extracted data. A report was generated by Cellebrite [REDACTED]. I transferred both of the reports to a CD.

Attachments:

(1) 2 CDs containing the above extracted information from Cellebrite.

Examiner : Officer Steven Wood #2031

Signature :

[REDACTED]

2031/

Date: 2/27/15



SAN FRANCISCO POLICE DEPARTMENT

FORENSIC SERVICES DIVISION

Cellular Phone, Computer, Forensic Art & Forensic Video Examination Request

CASE NUMBER (DEPARTMENT) 50178555	UNIT REQUESTING Homicide	DATE OF REQUEST 2/27/2015
LABORATORY NUMBER	SUSPECT	DATE OF OCCURRENCE 2/26/2015
CHARGE	COMPLAINANT / VICTIM	OTHER NUMBER

DESCRIPTION OF EVIDENCE AND EXAMINATION REQUEST

REQUIRED DOCUMENTATION:

1. SUBMIT A SEPARATE LABORATORY EXAMINATION REQUEST FOR EACH INCIDENT NUMBER.
2. ATTACH A COPY OF THE INITIAL NARRATIVE POLICE REPORT, QPRL EVIDENCE SHEET.
3. FOR COMPUTER OR CELLULAR PHONE; ATTACH A COPY OF A SEARCH WARRANT (FACE & WISH LIST) OR SIGNED CONSENT TO SEARCH FROM THE OWNER. **ITEM WILL NOT BE PROCESSED WITHOUT A SEARCH WARRANT OR SIGNED CONSENT.**

CELLULAR PHONE:

(Cingular/MetroPCS/T-Mobile/Verizon etc.)

Cell #, if known

1. Brand (Nokia, Motorola etc): Samsung Model # Unk SER. PROVIDER: Unk
1. Brand (Nokia, Motorola etc): _____ Model # _____ SER. PROVIDER: _____

* List scope of analysis (phone list/images/etc.) on the back page of this request & additional phones.

COMPUTER FORENSICS:

- ☐ Desktop Computer (how many __) ☐ Laptop Computer (how many __) ☐ PDA ☐ Digital Camera
- ☐ Hard Drive(s) (how many __) ☐ CD or DVD rom (how many __) ☐ Floppy/Zip Disks (how many __)
- ☐ Portable media i.e. Flash card, smart media, secure digital, thumb drive, etc. Specify type: _____

* List scope of analysis (e-mail/images/documents) on the back page of this request.

FORENSIC ART:

- Composite Drawing (provide info below)

Most Reliable Witness: _____

Witness contact number: _____ Cell: _____

How did the witness view the suspect? ☐ Front ☐ Profile ☐ ¾ View

- ☐ Adult Age Progression
- ☐ Child Age Progression
- ☐ Fugitive Update
- ☐ Post Mortem
- ☐ Skull Reconstruction

*List special notes or instructions on the back page of this request.

FORENSIC VIDEO:

1. Service Type:

- ☐ Audio ☐ Develop Still Images ☐ Create Court Presentation
- ☐ Duplicate CD/DVD/Tape ☐ Other: _____

2. Evidence Submitted:

- ☐ Analog Tape Brand: _____ Size: _____ ☐ "Foreview" Chip
- CD/DVD ☐ Other: _____
- Mini DV Proprietary "Codec" on Disk: Yes ☐ No ☐

*List special notes or instructions on the back page of this request.

REASON/DATE FOR REQUEST:

- Investigation ☐ Rebooking ☐ Preliminary Hearing ☐ Superior Court Trial
- DA Request (ADA Name & Contact Number) _____
- Other Reason: _____ Date Results Needed: _____

REQUESTED BY / CONTACT NUMBER

Sgt. Canning 734-3634

APPROVED BY / CONTACT NUMBER

RANK / STAR #

Q52 269

RANK / STAR #

Lt. A. #1005



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SPECIAL NOTES / REQUEST / INSTRUCTIONS

Phone from deceased person involved in an OIS. Please extract all available data from phone in order to facilitate next of kin notification.

FORENSIC VIDEO USE ONLY

Condition of Evidence: _____

- | | | | | |
|-------------------------------------|---------------------------------------|---------------------------------------|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Real Time | <input type="checkbox"/> # of Cameras | <input type="checkbox"/> Field Level | <input type="checkbox"/> Multiplex | <input type="checkbox"/> Quad Screen |
| <input type="checkbox"/> Time Lapse | <input type="checkbox"/> Color | <input type="checkbox"/> Single level | <input type="checkbox"/> Switcher | <input type="checkbox"/> Audio |
| <input type="checkbox"/> B&W | | | | <input type="checkbox"/> Collage Made |

FORENSIC SERVICES DIVISION USE ONLY

ADDITIONAL INFORMATION: